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Our Lady of Mercy

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OUR LADY OF MERCY HOSPITAL

Dyer, Indiana

Annual Report 1981-82

celebrating
40 years
of Mercy care

A DIVISION OF THE SISTERS OF MERCY HEALTH CORPORATION

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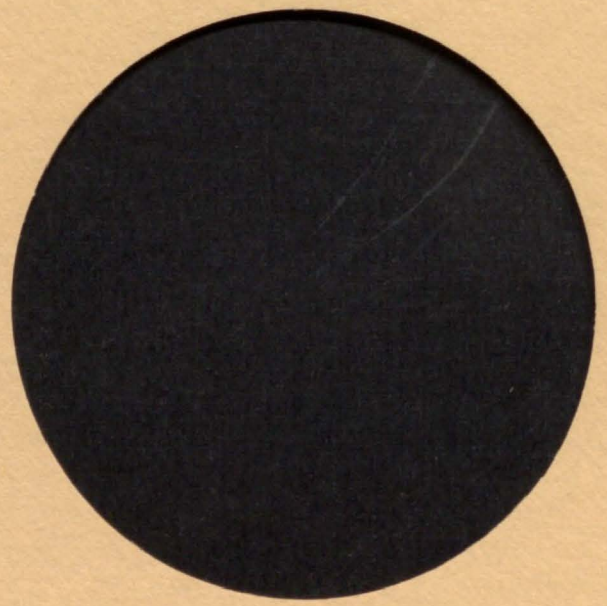

OUR LADY OF MERCY HOSPITAL

Dyer, Indiana

Annual Report 1981-82

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ADMINISTRATORS OUR LADY OF MERCY HOSPITAL

1942—Sister Reginald Dexter, R.S.M.
1952—Sister Teresa Marie Conley, R.S.M.
1955—Sister Clementia Pesha, R.S.M.
1961—Sister Pierre LeClaire, R.S.M.
1966—Sister Francis Xavier Villerot, R.S.M.
1972—Sister Marcia Wilhelmi, R.S.M.
1978—Sister Florence Salatka, R.S.M.
1979—Ms. Judith K. Call

1942

1982

Celebrating 40 Years of Mercy Care

The counting off of years and months stands as an age-old tradition, though somewhat arbitrary. Person follows person, generation follows generation, creating and shaping a future for those who follow. Anniversaries give reason to remember, celebrate, and give thanks for those people who initiated the beginnings of a history.

Today after forty years Our Lady of Mercy Hospital looks back to the courageous women of Mercy who pioneered health care in this region. In remembering we acknowledge the movement and change, contingency and discontinuity—ever present factors of historical activity.

We remember Catherine McCauley, who founded the Sisters of Mercy out of love and concern for the poor and homeless.

We remember Frances Warde who brought the works of Mercy to American frontiers.

We remember Sister Vincent McDermott who established in Hammond the prototype of Our Lady of Mercy Hospital.

We remember Sister Reginald Dexter, the first Our Lady of Mercy Hospital administrator and her successors.

Even four decades ago, life in the Calumet region was relatively simple. So was medical care. Founded in 1942 as Mt. Mercy Sanitarium, Our Lady of Mercy Hospital provided psychiatric care in its bucolic setting for ten years.

Expansion in 1952 to provide medical and surgical care marked the beginning of continuous growth in health care services offered to the surrounding community by Our Lady of Mercy.

In this anniversary year of 1982 Our Lady of Mercy Hospital celebrates the tradition of Mercy care and healing and recommits its resources to health progress in medical and mental health care for the people of the community.

DIVISIONAL BOARD

JUDITH K. CALL
Dyer, IN
President/Chief Executive Officer
Our Lady of Mercy Hospital

WILLIAM T. CLARKE
Merrillville, IN
Retired
Indiana Bell Telephone Company

JOSEPH A. CLUNE, Ed.D.
Crown Point, IN
Personnel/Building & Grounds Director
Lake Central School Corporation

LILLIAN MARIE CONNOLLY, R.S.M.
Forty-Fort, PA
Faculty
Misericordia College

PAUL DOHERTY
Highland, IN
Town Clerk
Town of Highland

JACK EARNSHAW
Dyer, IN
Owner
Color Unlimited

GORDON L. FRYER
Dyer, IN
Retired
American Medical Association

FRANCES MARIE GERHARD, R.S.M.
Farmington Hills, MI
Vice President
Sisters of Mercy Health Corporation

RENEE HUMBLE, R.S.M.
Homewood, IL
Administrator
Mercy Health Care and
Rehabilitation Center

JOAN MARIE MITCHELL, R.S.M.
Dubuque, IA
Director of Sponsorship
Mercy Health Center

JOSEPH MURPHY, M.D.
Lansing, IL
Psychiatrist

JAMES F. PURCELL
Munster, IN
Senior Vice President
Northern Indiana Public Service Co.

RONALD W. RANDHAN
Merrillville, IN
Senior Vice President
Gary National Bank

HOMER SMITH
Homewood, IL
Director Corporate Health Services
Inland Steel Company

THOMAS C. TYRRELL, M.D.
Calumet City, IL
Physician/Surgeon

JAMES P. UTTLEY
Dyer, IN
Pastor
United Presbyterian Church

CAROL ANN VOTRUBA, R.S.M.
Dubuque, IA
Vice President-Administrative
Services
Mercy Health Center

Model of Phase II expansion

A YEAR OF GROWTH AND CHALLENGE

James F. Purcell

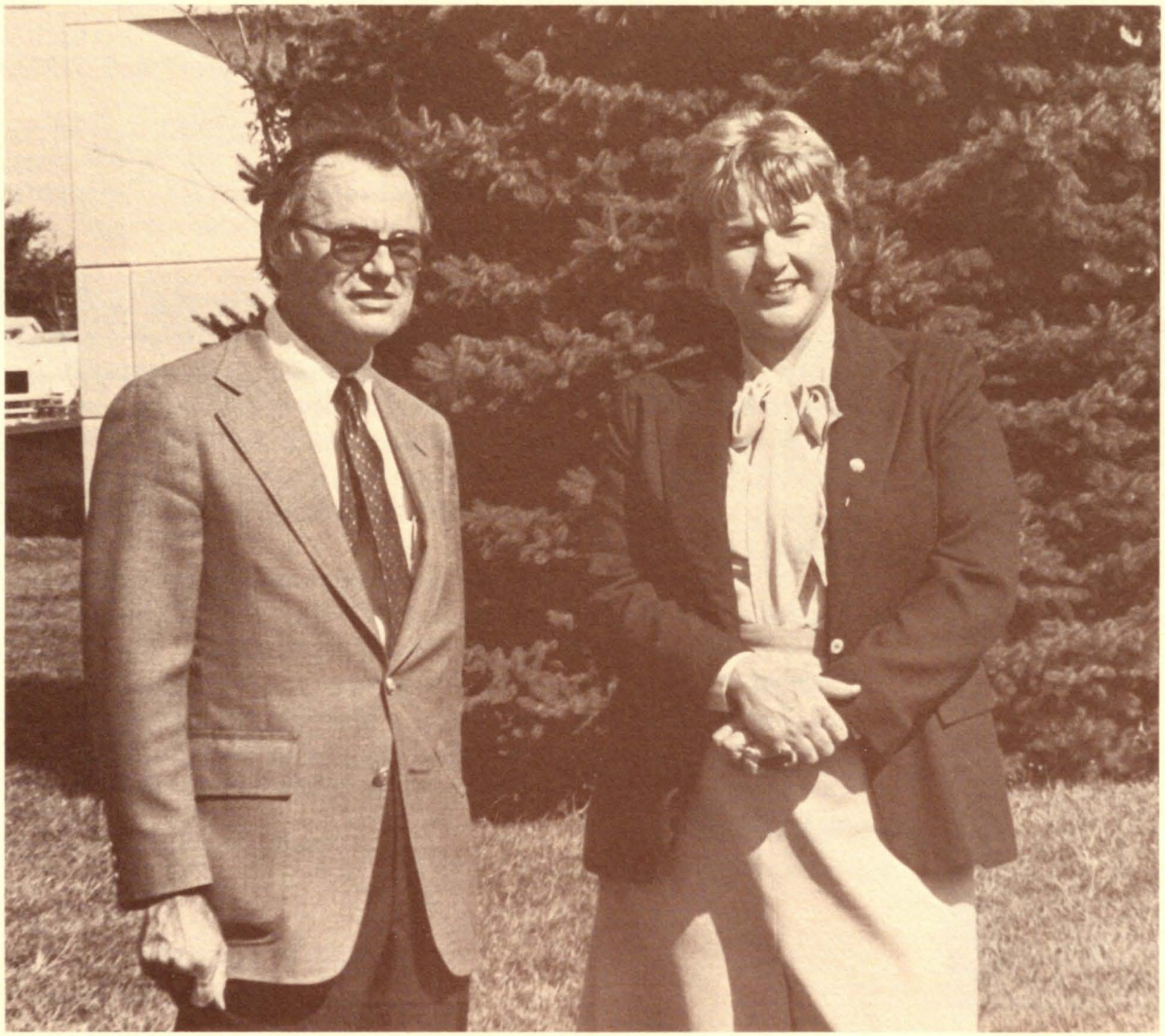
Nineteen eighty-two was a year of accomplishment and challenge at Our Lady of Mercy Hospital. We completed a major expansion of our facilities, strengthened and enlarged our dedicated staff, and improved the delivery of health care services to patients. These significant achievements came during a period of escalating government intrusion into the health care arena and a severe economic downturn which impacted heavily on all of the people of northwest Indiana.,

In the year ahead, we will continue to pursue those values of dignity and respect for human beings inspired by the mission and goals of the Sisters of Mercy Health Corporation. Our uncompromising adherence to those ideals, together with effective leadership, dedicated physicians, a highly qualified professional staff and a legion of loyal volunteers, have combined to make Our Lady of Mercy Hospital a unique institution of which we can all be proud.

JAMES F. PURCELL
Divisional Board Chairman

OUR LADY OF MERCY HOSPITAL

The philosophy of Our Lady of Mercy Hospital derives its essential character from the philosophy of the Sisters of Mercy Health Corporation. The translation of the promise of this ideal from written statement to lived reality in Dyer, Indiana is guided by the administrative staff of Our Lady of Mercy Hospital. Judith Call, president and chief executive officer; Michael Peterson, senior vice-president and chief operating officer and Leonard Stangl, senior vice-president for corporate affairs, pause at the hospital anniversary juncture and consider health care at Our Lady of Mercy today, the heritage of its past and the challenge of its future.



Call: "This year as throughout its 40-year history, Our Lady of Mercy Hospital is committed to increasing both the quality of and access to health care services in this region. It's been an especially significant year with the opening of the new psychiatric services center and the planning for future expansion."

Peterson: "The new psychiatric facility complements the original purpose of Our Lady of Mercy Hospital. It began as a purely psychiatric facility in a pastoral setting. Later it took on a medical/surgical role to meet still other needs."

Call: "The world around us is rapidly changing. Programs we have now will not be adequate for the future. We're going to have to provide a wider array of psychiatric services—residential congregate living, day hospital programs—to provide for persons left out as long term voluntary care programs for the mentally ill break down."

Peterson: "The new building has space for a partial hospitalization program. This represents an attempt to provide alternatives to acute hospitalization in psychiatric services."

Leonard Stangl and Judith Call

TODAY . . . AND TOMORROW

Stangl: "Moving into the new building represents a major commitment to psychiatry—a reaffirmation of a role. In this same year (1981) that we provided the psychiatric building and programs we provided emergency service. Our response is more than a new emergency building. It's coupled with the same kind of understanding for patients in extreme acute situations that we have had for psychiatric or medical/surgical patients in the past. People needed another type of help, and we provided staffing, people who understand crisis. As we recognize and interpret the needs we deal with them in physical ways through programs."

Peterson: "We've made a major attempt to respond—a door open to the medical needs of Dyer, Sauk Village, Schererville, St. John. We're developing a state-of-the-art facilty responsive to community needs.

Call: "One of the strengths of this organization historically has been the caring, individual family-approach that has existed here; people feel the genuine concern."

Stangl: "Yes, *we've* (Call, Peterson, Stangl) only been here four years, but we found that a basic strength in the organization was its caring nature. We've worked on management procedures and policies as well as the future vision, but we must protect this caring nature, for patients, for employees."

Call: "The character and principles of the Sisters of Mercy Health Corporation, our sponsoring group, make health care at Our Lady of Mercy exceptional. The tradition of caring, the commitment to the healing mission of the Church, comes from the Sisters of Mercy. We continue to provide services consistent with their philosophy while we are vigilant to local community needs.

Their ministry focus on the poor, the powerless, the elderly will continue to shape the future of Our Lady of Mercy. Phase II of the expansion program incorporates services to aid the growing aging population. Also the population increase happening in southern and central Lake County, Will County and southern Cook County."

Peterson: "Phase II attempts to recognize the health problems of the elderly—rheumatoid arthritis, strokes—diseases not handled well in this area. We are in a region of heavy industry. Respiratory medicine is a service not well provided relative to its needs."

Call: "We cannot divorce ourselves from the community. The increase in the elderly population in this area,—nearly 12% over 65 by 1990—is dramatic in a short period of time. This institution will move into the role of taking care of sicker people. This is not our design, but this is what economic trends and societal needs dictate."

Michael Peterson

Peterson: "In Phase II we are saying we are going to recommit to medical/surgical care. In one period of time very little had been done to upgrade those facilities and services here. We're taking a gigantic step bringing ourselves to state-of-the-art. It's a reinvestment in the future of Dyer and nearby communities.

Stangl: "Our Lady of Mercy Hospital is a partner in the economy of this area. We pay back 60% of our dollar income as wages and benefits to our employees, and this is distributed in the general economy. The upgrade of employee compensation combined with the improvement of hospital facilities and development of services and departments has been the result of a four-year focus."

Call: "And Phase II is not isolated from the 40-year history of the hospital. Decisions made this year, the decisions to go ahead with the expansion recommits this institution to a major role in medical/surgical care. We do not deny or ignore our role in psychiatric services; we've made a significant recommitment to provide this service. The physical reality of the buildings signifies a commitment to stay, work and be viable in this area. The reason we need Phase II now is because of our seriousness of the future of this organization and its survival."

Peterson: "In 1977, the Sisters of Mercy Health Corporation reaffirmed Our Lady of Mercy Hospital when they committed to remain in Dyer. We strive to continue their tradition of responding to the needs of this area in a variety of ways as we've done in psychiatric and medical/surgical care."

Call: "We're looking into the development of housing for the elderly as a future option. In the recent past, our divisional board, the local governing board given authority and responsibility by the Sisters of Mercy Health Corporation, reviewed the site and direction of the hospital. They determined that future hospital buildings should expand on the Indiana property. This decision opened opportunities to develop other needed human services on the Illinois acreage. Needs assessments will help to determine how the elderly, the underserved can best be helped. Housing for the elderly may well be in the scope and mission of Our Lady of Mercy Hospital. It's a challenging task—we want to accomplish it with vision, discipline and creativity."

SENIOR ADMINISTRATIVE STAFF 1981-82

JUDITH K. CALL
President/Chief Executive Officer

MICHAEL J. PETERSON
Senior Vice President/
Chief Operating Officer

LEONARD STANGL
Senior Vice President/
Corporate Affairs

LOUISE BEAVER
Vice President/Patient Care Services

JOSEPH E. BONNETT
Vice President/Professional Services

JOSEPH L. BOTON
Vice President/Human Resources

LARRY SMITH
Vice President/Finance and
Administrative Services

A YEAR OF CARE AND COMMITMENT

This past year has been one of both maturing and growth for the medical staff at Our Lady of Mercy Hospital. In December, 1981, Charles D. Egnatz, M.D., completed his term of office as medical staff president. Under his leadership the staff continued to gain experience in working with new bylaws, rules and regulations. The medical staff departments have been carefully reviewing the rules and regulations affecting their membership. By year's end all of the medical staff departments had revised the assignment of clinical privileges for their members. Our medical staff organization is now stronger and more willing to take on the difficult, but necessary tasks of standard setting and peer review.

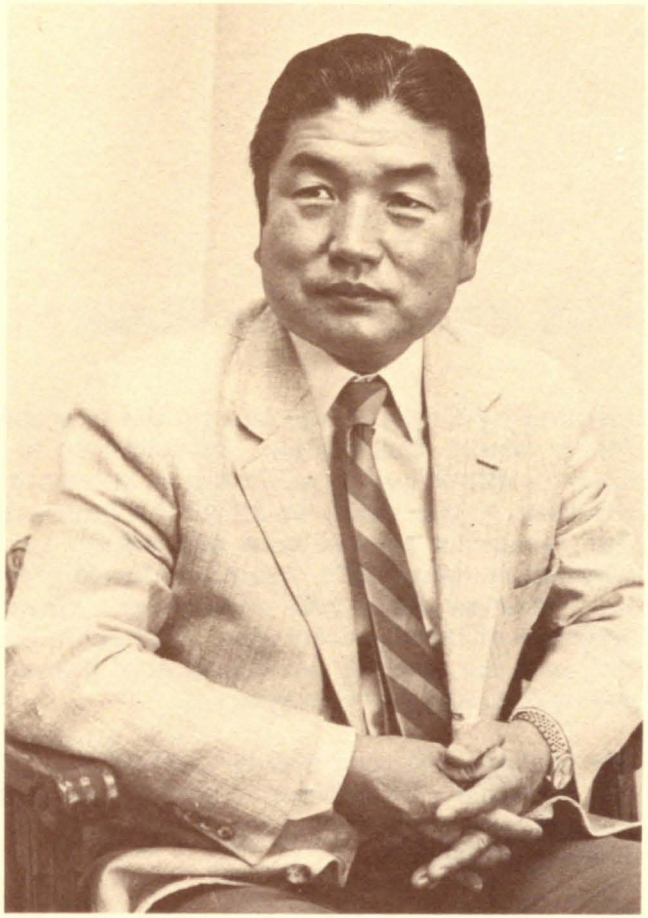
The medical staff has experienced rapid growth and change in the composition of its membership this year with 24 new appointments involving a wide variety of specialties and sub-specialties. In February, 1982, Drs. Richard Markey and Adolph Walker retired from the anesthesia department after ably serving the hospital for many years. A joint medical staff-administration committee selected Shireen Ahmad, M.D., as the new medical director of anesthesia. Earlier, Elliot Stokar, M.D., assumed the responsibility as medical director of respiratory medicine.

Alexander Stemer, M.D., director of medical education, began the implementation of continuing medical education programs for the medical staff. By the end of the year, each clinical department had had an ongoing program provided through the hospital.

This year has seen both completion and the beginning of major construction and renovation projects. The psychiatry department moved into its new facilities in August, 1981. The end result of better equipment, more space and pleasant surroundings made the hospital renovations worthwhile. The medical staff strongly supported the hospital management and its divisional board in seeking approval for a major new construction project to provide new surgery, critical care, acute medical/surgical beds, new diagnostic and treatment departments and a CT scanner.

The medical staff is a growing and maturing organization that is able and willing to participate in the increased role for Our Lady of Mercy Hospital among the health care providers in Lake County and the South Suburban Chicago region.

KYUNG AHN, M.D.
President, Medical Staff



Kyung Ahn, M.D.

Our Lady of Mercy Medical Staff Officers

KYUNG AHN, M.D.
President

NICHOLAS EGNATZ, M.D.
President/Elect

JEROME MARCH, D.O.
Secretary

MICHAEL LARSON, M.D.
Treasurer

LESTER DAROS, D.O.
Chairperson/Family Practice

ADELA PEREZ, M.D.
Chairperson/Medicine

GLORIA GALANTE, M.D.
Chairperson/Psychiatry

CARLOS CESPEDES, M.D.
Chairperson/Surgery

Philosophy of the Sisters of Mercy Health Corporation

Inspired by Christ Jesus and by the example of Catherine McAuley, we of the Sisters of Mercy Health Corporation, participating in the healing mission of the Roman Catholic Church, affirm our commitment to serve our community—especially the needy, the ill, the disabled. In our works we affirm the dignity and value of each person. Within the limits of our resources we dedicate our efforts to aid all persons in their striving for human wholeness—physically, spiritually, socially and intellectually. We acknowledge health as a basic human value and commit our efforts to promote, preserve, protect and restore wellness wherever we are able. By health, we understand not simply release from suffering and pain but also the development of human life: within the individual, among individuals and within social structures.

We embrace the opportunity to extend compassionate service to the suffering, the lonely, the marginal. We acknowledge sickness, suffering and death as integral aspects of human life and as possible occasions of experiencing God. In these moments we strive to offer hope healing and peace.

We pledge ourselves to these values and beliefs; we commit ourselves to continually seek out ways of embodying them in our services, actions and activities.

Philosophy of Our Lady of Mercy Hospital

Inspired by the Gospels and the ideals of the Sisters of Mercy Health Corporation, the philosophy of Our Lady of Mercy Hospital is to affirm the dignity and value of human life while providing, within hospital resources, high quality care to the needy, sick, injured and distressed.

Mission of Our Lady of Mercy Hospital

Our Lady of Mercy Hospital maintains and develops resources, physical facilities and programs for health care and health maintenance activities. These activities are carried out in order to minister to the physical, emotional, social and spiritual needs of the patient, the family and employees.

Based on the beliefs of the Sisters of Mercy Health Corporation to promote, preserve, protect and restore wellness, the mission of Our Lady of Mercy Hospital is to provide quality inpatient and outpatient medical/surgical and psychiatric care, as well as diagnostic and rehabilitative services.

Our Lady of Mercy Hospital effectively utilizes available resources in supporting and seeking to improve the physical and mental health status of those who live in northwest Indiana and adjacent Illinois communities. Competent and attentive care is provided to every patient, regardless of age, race, creed, disability or economic status.

It is also Our Lady of Mercy Hospital's mission to provide leadership and cooperative action when dealing with communities, businesses, government agencies and other health care institutions. As a responsible member of the community, Our Lady of Mercy Hospital seeks to contribute and develop its services to meet the needs of the area and to maintain a viable environment consonant with its resources and in keeping with its mission.

SOME STEPPING STONES OF 1981-1982

JULY
Respiratory Therapy acquired a pulmonary function machine—a Collins Apex 420 model serving outpatients as well as persons hospitalized at Our Lady of Mercy. Dr. Elliot Stokar was named medical director of respiratory therapy.

The radiology department of Our Lady of Mercy Hospital pioneered the rare earth intensifying screen x-ray system in northwest Indiana. The newly-developed system reduces radiation exposure while it provides better quality images.

AUGUST
A five-day celebration marked the completion and dedication of the Psychiatric Services Center of Our Lady of Mercy Hospital. Bishop Andrew Grutka presided at the Eucharistic liturgy of the opening ceremony. The keynote speaker was Dr. Harold Visotsky of Northwestern University and Northwest Memorial Hospital. The four-level, 95 bed wing houses programs for diagnostic and therapeutic care for patients with mental illness and related disorders.

SEPTEMBER
Our Lady of Mercy Hospital joined with the world Mercy family to celebrate the 150th anniversary of Catherine McAuley's founding of the Sisters of Mercy in Dublin, Ireland. Frances Warde, close friend and associate of Catherine McAuley, extended the Mercy mission of service to others opening the first U.S. Convent of Mercy in 1843.

The department in alcoholism services expanded to address the needs of the alcoholic patient provides inpatient consultation and education. Staff education focusing on the disease of alcoholism and its treatment implications complemented the department goals this year.

OCTOBER
The Marcus Wallack Heart Fund AssociatiGn funded the purchase of a new Hewlet-Packard heart monitor and defibrillation unit.

NOVEMBER
The Sisters of Mercy Health Corporation board expressed conceptual approval for the scope and budget of the Phase II project. Phase II will include new construction for critical and acute medical/surgical nursing units and for diagnostic and treatment services as well as renovation of the vacated areas of the existing facilities.

MARCH
The hospital divisional board granted Indiana Congressman Adam Benjamin, Jr. its distinguished service award. The annual honor highlighted Benjamin's role as a humanitarian, noting his efforts and achievements in behalf of community health care and health care providers.

APRIL
The Indiana State Board of Health approved the Phase II project for Our Lady of Mercy Hospital. The expansion will provide new services in comprehensive respiratory care, rheumatology and neurology.

The Brahos scholarships offered through the Our Lady of Mercy Hospital auxiliary provide financial assistance to individuals preparing for medical or health related careers. Recipients this year include Gail Alkire, Susan Petrunich, and Teri Tebelman.

MAY
The care in health services comes from people. Hospital employees representing 690 years of this care were honored at the annual awards dinner. Recipients, 83 in number, marked anniversaries of 5, 10, 15 and 20 years of service.

Members of Our Lady of Mercy Hospital auxiliary and volunteers—junior, inservice and thrift shop—contributed a record 29,492 hours of time and talent to patients and their families this year.

JUNE

The goal of the one year old Quality Assurance Program is the maintenance and improvement of patient care through problem identification and resolution.

Significant improvements in patient care achieved include: the upgrading of anesthesia care, improvements in medical education quality, reduction in patient falls, and increased patient satisfaction with food service.

The physicians' recognition dinner honored Dr. Julian Lewis, M.D., of Our Lady of Mercy's pathology department.

Hospital renovation completing Phase I touched almost every area and department of Our Lady of Mercy Hospital. The resulting improvement in functional layout and enlargement of vital supporting services results in improved patient care.

SUMMARY OF FINANCIAL POSITION

June 30, 1982

OUR ASSETS	
We have cash in the banks	$ 130,000.
We expect to collect amounts owed from patients and insurance companies	4,787.000.
Medicare and Medicaid owes us	775,000.
We have supplies on hand for patients	379,000.
We prepaid some expenses	46,000.
The bank holds cash and investments for specifically approved construction and equipment	4,303,000.
Our buildings, equipment and property costs totaled	25,090,000.
OUR TOTAL ASSETS ARE WORTH	$35,510,000.
OUR DEBTS AND OWNERSHIP	
We currently owe suppliers of services and supplies	$ 2,388,000.
We owe others	2,317,000.
We owe bondholders for monies paid for construction	18,020,000.
We have accumulated earnings over 40 years for construction of buildings and purchase of equipment	12,785,000.
OUR TOTAL DEBTS AND OWNERSHIP	$35,510,000.

REVENUE

WE RECEIVED OUR REVENUE FROM	1982	1981
Daily patient care including room and board for 85,279 inpatient days (1982) and 83, 295 inpatient days (1981)	$16,780,000.	$13,710,000.
Testing, treating, drugs and supplies for patients in hospital	11,929,000.	9,196,000.
Testing, treating, drugs and supplies for outpatients and emergency patients	2,537,000.	1,899,000.
REVENUE FROM OUR PATIENTS	$31,246,000.	$24,805,000.
WE DID NOT RECEIVE THIS REVENUE FROM		
Medicare and Medicaid which do not pay total revenue for patient services	$ 1,427,000.	$ 1,238,000.
Patients who were unable to pay	1,510,000.	1,081,000.
REVENUE NOT RECEIVED	$ 2,937,000.	$ 2,319,000.
WE RECEIVED OTHER REVENUE FOR CAFETERIA SALES, CONTRACTED PROFESSIONAL SERVICES AND VENDING SALES	$ 157,000.	$ 154,000.
WE RECEIVED DONATIONS AND INVESTMENT INCOME	908,000.	1,075,000.
WE RECEIVED THIS TOTAL REVENUE	$29,374,000.	$23,715,000.

EXPENSE

WE INCURRED THE FOLLOWING EXPENSES	1982	1981
Salaries and wages to our employees	$13,681,000.	$11,606,000.
Benefits to our employees	2,667,000.	1,603,000.
Fees to contracted specialists	1,505,000.	1,251,000.
Supplies necessary for patient care	3,779,000.	3,143,000.
Utilities, repairs and maintenance	1,085,000.	802,000.
Other expenses for patient care	2,192,000.	1,658,000.
Insurance to protect our patients, employees and facility	56,000.	52,000.
Interest on our mortgage	1,442,000.	1,060,000.
Replacement of equipment and facilities	1,268,000.	720,000.
WE INCURRED THIS TOTAL EXPENSE	$27,675,000.	$21,895,000.

TWELVE MONTH FISCAL PERIODS ENDED JUNE 30

WE PAID FOR CONSTRUCTION AND EQUIPMENT	$ 1,699,000.	$ 1,820,000.
WE PAID OUT THIS TOTAL AMOUNT TO PROVIDE QUALITY PATIENT CARE	$29,374,000.	$23,715,000.

HOSPITAL SERVICES

- Acute care
  - Intensive care
  - Coronary care
  - Medical/surgical care
  - Orthopedics
  - Pediatrics
  - Telemetry
- Alcoholism services
- Cardiology
  - Echocardiography
  - Holter monitoring
  - Stress testing
  - Electrocardiography
- Cardio-pulmonary rehabilitation
- Emergency medicine/24 hours
- Neurology
  - EEG, EMG
- Nuclear cardiology
- Nuclear medicine
- Laboratory and pathology
  - Hematology
  - Chemistry
  - Microbiology
  - Histology
  - Cytology
  - Serology
  - Blood bank
  - Urinalysis
  - Therapeutic drug monitoring
- Occupational/recreational therapy
- Pastoral care
- Pharmacy
- Physical therapy
- Psychiatric care
  - Adolescent/young adult unit
  - Partial hospitalization program
- Radiology
  - Angiography
  - Ultrasound
  - Digital imaging
- Respiratory therapy
  - Pulmonary function testing
  - Pulmonary rehabilitation
- Surgery
  - Same day surgery
  - Social work services
- Volunteer services

HOSPITAL SERVICES SUMMARY

	1981-82	% Change Since 1980-81
Patients admitted	7,693	– 1.2%
Patient days	85,279	+ 2.4%
Percent of occupancy	90%	+ 1.5%
Average length of stay	11.0	+ 3.8%
Diagnostic tests		
Cardiology procedures	12,626	+ 6.8%
EEG, EMG	8,533	+ 4.9%
Laboratory procedures	286,780	+ 4.5%
Radiological procedures	33.233	+ 1.6%
Emergency cases	10,431	– 4.8%
Partial hospitalization program	2,478	began 10/80
Surgeries	3,827	+ 2.8%
Treatments		
Occupational therapy rehab	1,911	+50.4%
Physical therapy	73,276	+35.0%
Respiratory therapy	102,091	+ 5.1%

PLANNING FOR TOMORROW

TAX-DEDUCTIBLE GIFTS

Our Lady of Mercy Hospital provides opportunities for members of the communities served to share in future growth. Listed below are several methods you can use to make a tax-deductible gift. Your support will ensure Our Lady of Mercy's continuance as a progressive health care institution. At the same time, your gift will help keep patient charges as low as possible.

MEMORIAL GIFTS

A special way to remember a deceased relative or friend is through a "living memorial" gift to Our Lady of Mercy Hospital.

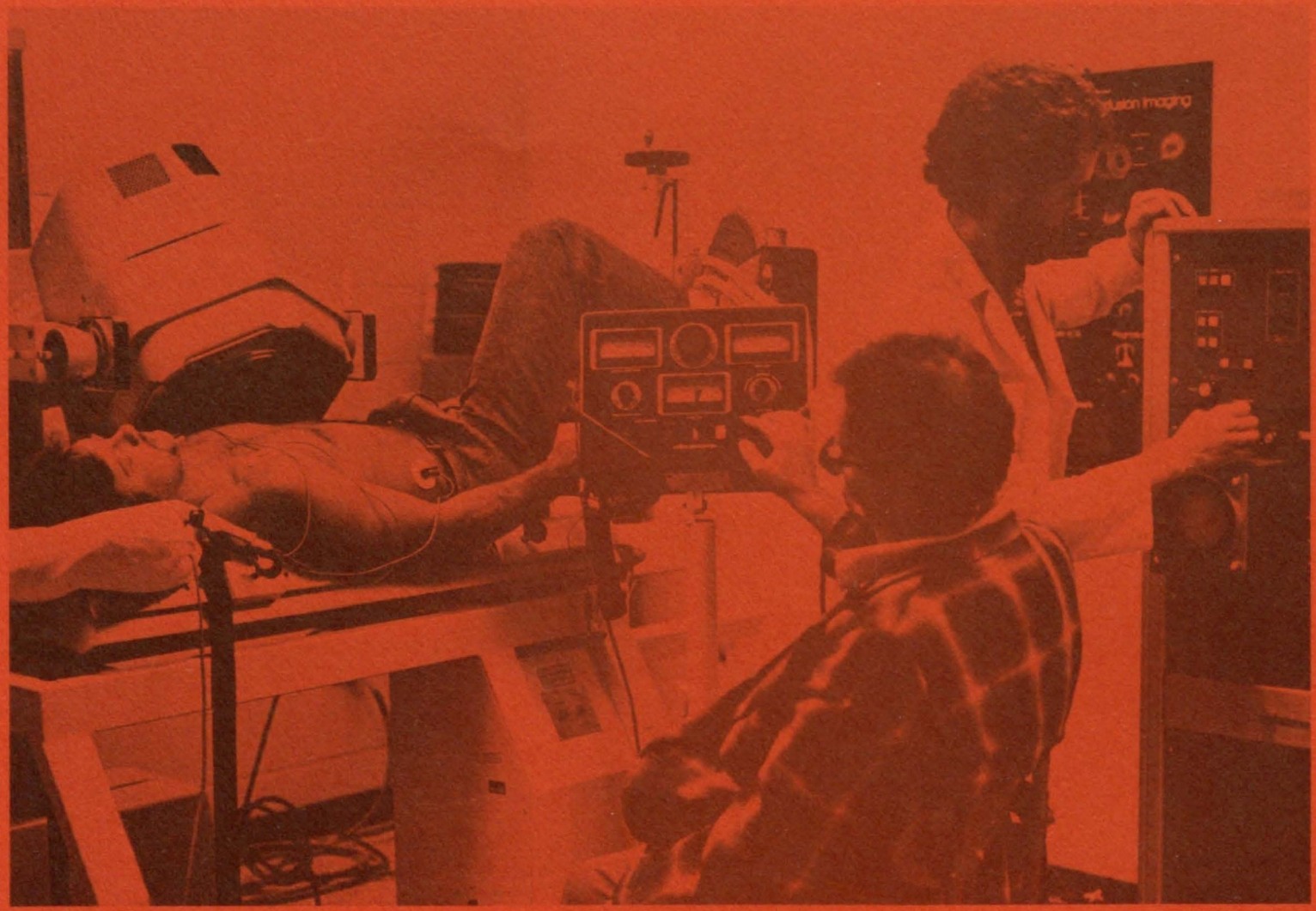
WILL AND BEQUESTS

Including Our Lady of Mercy in your will is an excellent way to provide a "gift in perpetuity" and assist the hospital in maintaining its fine health care services.

MERCY DEVELOPMENT FUND

A donation to the Mercy Challenge Fund assists the hospital in updating its facilities and expanding its programs for improved patient care and community health education.

To discuss these opportunities in more detail or to obtain additional information, please contact the hospital's development office at (219) 865-2141, extension 4643.



OUR LADY OF MERCY HOSPITAL

Accredited by
The Joint Commission on Accreditation of Hospitals

Member of
American Hospital Association
Catholic Hospital Association
Indiana State Hospital Association
National Association of Private Psychiatric Hospitals

A division of the Sisters of Mercy Health Corporation

Annual Report Production: Carol Fleming

OUR LADY OF MERCY HOSPITAL ANNUAL REPORT 1982